# **TEXAS WORKFORCE COMMISSION**

Workforce Investment Act & Trade Adjustment Assistance
Data Element Review

### Glossary

#### **General Terms**

Cross match: Information migrated from another state system into The Workforce Information System of Texas (TWIST).

*Match:* Data that is contained in the source documentation must be the same as the information for which it is collected. For example, source documents obtained to verify the data element "Date of Birth" must have the same date as the information entered into TWIST.

Support: Evidence that the data in a source document is correct. For example, if "support" is required, source documents obtained to verify "Low Income" status must provide evidence that the participant fits within the income requirement.

Self-attestation: Occurs when a participant states his or her status for a particular data element and then signs and dates a form acknowledging the status. This information must be entered into TWIST Counselor Notes, and a copy of the self-attestation form must be maintained in a hard case file.

Self-attestation appearing in TWIST through entry into WorkInTexas.com: Information entered by participants in WorkInTexas.com is authenticated through login and password. This process is considered to be the same as an electronic signature and meets the definition of self-attestation.

Validated at the state level: For instances in which validation occurs through systems not available to Local Workforce Development Boards (Boards), such as the Wage Record Interchange System (WRIS) or Federal Employment Data Exchange System (FEDES), the element will be validated by the state office.

*Verbal declaration:* Occurs when an individual states his or her response for a particular data element but is not required sign a document acknowledging the oral statement. The provided information must be entered into TWIST *Counselor Notes*.

System-generated date: Date calculated by TWIST within TWIST screens. For example, the "Date of Exit" located within the Common Measures screen is automatically calculated by TWIST; users do not have the ability to change it.

User-generated date: Date entered into TWIST by the system user. For example, the Service Tracking screen allows users to enter a "Start Date."

Hard case file: Paper files maintained apart from TWIST; or, an electronic data storage system used to store scanned documents.

DRVS: Data Reporting and Validation System.

### **Terminology Key**

In this document, the Texas Workforce Commission (TWC) uses language specific to TWC applications in place of U.S. Department of Labor (DOL) terminology. The following is a key that will assist users in identifying the link between TWC and DOL terminology.

DOL Terminology	TWC Terminology
State MIS	TWIST
Case notes – DOL uses this term interchangeably to refer to paper or electronic notations by case managers.	TWIST Counselor Notes – electronic
	Hard case files – Paper or electronic (separate from TWIST records)

#### **Table Key**

Yellow Shading = Eligibility Element

## **Required Element**

Y = Yes

N = No

#### Validation Rule

S = Support

M = Match

Data Element	Data Element Name	Data Element Definition	Code Value		Re	equire	d		ion	State Source Documentation Requirements  TAA Specific	Notes
Number				Adult	D/W	Youth	TAA	NEG	Validation Rule	TAA Specific	
	Date of Application	Record the date on which the individual first applied for Trade Act services/benefits under the applicable certification.	YYYYMMDD	N	N	N	Y	N	M	TWIST Program Detail screen/ Program Summary Tab entry	User generated.
	Petition Number	Record the petition number of the certification which applies to the individual's worker group. If there is more than one petition number (for example, certification under both the TAA and NAFTA-TAA programs), record the petition number of the program from which the training is paid, unless a waiver was issued. Do NOT include any alphabetical suffix; record the petition number only.	Numeric	N	N	N	Y	N	M	Validated at the State Level	
	Basic Trade Readjustment Allowance	Record whether the participant received basic trade readjustment allowances(TRA)	Numeric: 1=Yes 2=No	N	N	N	Y	N	S	Validated at the State Level	
	Waiver from training requirement	Record the code that indicates the reason the participant received a waiver from the training requirement.	Numeric: 1= Recall 2= Marketable 3= Retirement 4= Health 5= Enrollment unavailable 6=Training not available 7= Reason unknown/Serv ed prior to 2002	N	N	N	Y	N	S	Waiver information entered on TWIST – TAA Program Detail screen, Waiver tab  Signed WOT-1 form - maintained in hard case file.	

Data Element	Data Element Name	Data Element Definition	Code Value		Rec	quired	i		n	Definition - Veteran	State Source Documentation	Notes
Number				Ì		Youth	TAA		Validatic Rule		Requirements	
	Veterans Status	Record 1 if the participant is a person who served on active duty in the Armed Forces and who was discharged or released from such service under conditions other than dishonorable.  Record 2 if the participant does not meet the condition described above.	0 = No	Y				Y		For the purposes of this element, "veteran" is defined as follows:  20 C.F.R. 1010.10(4)—a person who served in the active military, naval, or air service, and who was discharged or released therefrom under conditions other than dishonorable, as specified in 38 U.S.C. 101(2). Active service includes full-time duty in the National Guard or a Reserve component, other than full-time duty for training purposes.  State qualified veteran—an individual who:  • served in the military for not less than 90 consecutive days during a national emergency declared in accordance with federal law or was discharged from military service for an established service-connected disability;  • was honorably discharged from military service; and  • is competent.	Informational and Self-assisted Core Services  1) Verbal  Staff-assisted Core Services, Intensive or Training Services for Older Youth and Adult/DW/NEG Participants  1) Self-attestation;  2) DD-214; or 3) DD-215.	If a veteran presents a DD-214 upon arrival at the Texas Workforce Center, staff can use the DD-214 instead of the self-attestation form. If a DD-214 is on file at the Texas Workforce Center, the self-attestation form is neither necessary nor required.
#111	Eligible Veterans Status (Covered Person Status)  DRVS #12	Record 1 if the individual is a person who served in the active U.S. military, naval, or air service for a period of less than or equal to 180 days, and who was discharged or released from such service under conditions other than dishonorable.  Record 2 if the individual served on active duty for a period of more than 180 days and was	1 = Yes, <= 180 days 2 = Yes, Eligible Veteran 3 = Yes, Other Eligible Person	YY	Y	Y	Y	Y	S	For the purposes of this element, "eligible veterans" is defined as follows:  20 C.F.R. 1001.101 Eligible person shall mean: (1) The spouse of any person who died of a service-connected disability; or	Veterans  Informational and Self-assisted Core Services 1) Verbal  Staff-assisted Core Services, Intensive	To provide efficient customer service and ensure appropriate collection of data validation items, it is recommended that Boards collect validation material at the highest level (i.e., collecting data for intensive or training services levels rather than core service levels).
		discharged or released with other than a dishonorable discharge; or was discharged or released because of a service connected disability; or as a member of a Reserve component under an order to active duty	4 = No							(2) The spouse of any member of the Armed Forces serving on active duty who at the time of application for assistance under this subpart, is listed, pursuant to 37 U.S.C. 556 and	or Training Services for Older Youth and Adult/DW/NEG Participants	If a veteran presents a DD-214 upon arrival at the Texas Workforce Center, staff can use the DD-214 instead of the self-attestation form. If a DD-214 is on file at the Texas Workforce Center, the

Data Element	Data Element Name	Data Element Definition	Code Value		R	Require	d		ä	Definition - Veteran	State Source Documentation	Notes
Number				Adult	D/W	Youth	TAA	NEG	Validatio Rule	·	Requirements	
		pursuant to §167(a), (d), or (g), or §673(a) of Title 10, U.S.C., served on active duty during a period of war or in a campaign or expedition for which a campaign badge is authorized and was discharged or released from such duty with other than a dishonorable discharge.  Record 3 if the individual is a person who is:  (a) the spouse of any person who died on active duty or of a service connected disability;  (b) the spouse of any member of the Armed Forces serving on active duty who at the time of application for assistance under this part, is listed, pursuant to 38 U.S.C 101 and the regulations issued there under, by the Secretary concerned, in one or more of the following categories and has been so listed for more than 90 days:  (i) missing in action;  (ii) captured in the line of duty by a hostile force; or  (iii) forcibly detained or interned in the line of duty by a foreign government or power; or  (c) the spouse of any person who has a total disability permanent in nature resulting from a service-connected disability or the spouse of a veteran who died while a disability so evaluated was in existence.  Record 4 if the individual does not meet any one of the conditions described above.								the regulations issued there under, by the Secretary concerned, in one or more of the following categories and has been so listed for a total of more than 90 days: (i) Missing in action, (ii) captured in line of duty by a hostile force, or (iii) forcibly detained or interned in line of duty by a foreign government or power; or  (3) The spouse of any person who has a total disability permanent in nature resulting from a service-connected disability or the spouse of a veteran who died while a disability so evaluated was in existence.  Eligible veteran shall mean a person who (1) served on active duty for a period of more than 180 days and was discharged or released therefrom with other than a dishonorable discharge, or (2) was discharged or released from active duty because of a service-connected disability.	1) Self- attestation; 2) DD-214; or 3) DD-215.  Eligible Spouse  Informational and Self-assisted Core Services 1) Verbal  Staff-assisted Core Services, Intensive or Training Services for Older Youth and Adult/DW/NEG Participants 1) Self- attestation; 2) DD-214; or 3) DD-215.  TAA – as above	self-attestation form is neither necessary nor required.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data	Data Element Name	Data Element Definition	Code Value		R	equire	ed		a e	State Source Documentation Requirements	Notes
Element Number				Adult	D/W	Youth	TAA	NEG	Validation Rule		
#102	Date of Birth DRVS #3	Record the individual's date of birth.	YYYYMMDD	Y	Y	Y	N	N	M	<ol> <li>Birth certificate—preferred method of documentation.</li> <li>Other acceptable sources of documentation:         <ul> <li>a. Official records showing date of birth;</li> <li>b. Copy of I.D.</li> <li>c. Baptismal record;</li> <li>d. DD-214;</li> <li>e. Report of transfer or discharge paper;</li> <li>f. Driver's license;</li> <li>g. Federal, state, or local identification card;</li> <li>h. Passport;</li> <li>i. Hospital record of birth;</li> <li>j. Public assistance/social service records;</li> <li>k. School records or I.D. cards;</li> <li>l. Work permit, and;</li> <li>m. Tribal records.</li> </ul> </li> <li>Other official document issued by a federal, state, or local government agency, such as discharge documents from the Texas Department of Criminal Justice with date of birth included.</li> </ol>	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements
#115	Employment Status at Participation DRVS #16	Record 1 if the participant is a person who either (a) did any work at all as a paid employee, (b) did any work at all in his or her own business, profession, or farm, (c) worked 15 hours or more as an unpaid worker in an enterprise operated by a member of the family, or (d) is one who was not working, but has a job or business from which he or she was temporarily absent because of illness, bad weather, vacation, labor-management dispute, or personal reasons, whether or not paid by the employer for time off, and whether or not seeking another job.  Record 2 if the participant is a person who, although employed, either (a) has received a notice of termination of employment or the employer has issued a Worker Adjustment and Retraining Notification (WARN) or other notice that the facility or enterprise will close, or (b) is a transitioning service member.	1 = Employed, but Received Notice of Termination of Employment or Military Separation 3 = Not Employed	Y	Y	Y	N	Y	S	<ol> <li>Employed Individual         <ol> <li>Self-attestation, as demonstrated in TWIST and WorkInTexas.com; or</li> <li>TWIST Common Measures screen.</li> </ol> </li> <li>Intensive or Training Services for All Youth and Adult/DW/NEG Participants:         <ol> <li>Pay stub</li> </ol> </li> <li>Non-employed Individual         <ol> <li>Self-attestation as demonstrated in TWIST and WorkInTexas.com; or</li> <li>TWIST Common Measures screen.</li> </ol> </li> </ol>	Core services requirements do not apply to youth participants. Data elements for youth participants must be collected at established youth program levels.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  Employment Status At Participation information may have been entered into WorkInTexas.com by the participant. The information is authenticated through login and password. This process is considered to be the same as an electronic signature and meets the definition of self-attestation.

Data	Data Element Name	Data Element Definition	Code Value		R	equir	ed			e n	State Source Documentation Requirements	Notes
Element Number				Adult	D/W	Youth	TAA	NEG	NEG	Validatio Rul		
#119	Low Income DRVS #20	Record 3 if the individual does not meet any one of the conditions described above.  Record 1 if the individual is a person who:  (A) receives, or is a member of a family which receives, cash payments under a federal, state, or local income-based public assistance program; or  (B) received an income, or is a member of a family that received a total family income, for the six-month period prior to program participation (exclusive of unemployment compensation, child support payments, payments described in subparagraph A and old age and survivors insurance benefits received under section 202 of the Social Security Act (42 U.S.C 402)) that, in relation to family size does not exceed the higher of (i) the poverty line, for an equivalent period, or (ii) 70 percent of the lower living standard income level, for an equivalent period; or  (C) is a member of a household that receives (or has been determined within the 6-month period prior to program participation) Food Stamps under the Food Stamp Act of 1977 (7 U.S.C. 2011 et seq.); or  (D) qualifies as a homeless individual, as defined in subsections (a) and (c) of section 103 of the Stewart B. McKinney Homeless Assistance Act (42 U.S.C. 11302); or  (E) is a foster child on behalf of whom state or local government payments are made; or  (F) is a person with a disability whose own income meets the income criteria established in WIA section 101(25)(A) or (B), but is a member of a family whose income does not meet the established criteria.  Record 2 if the individual does not meet the criteria presented above.	1 = Yes 2 = No	Y	Z	Y	N	N	7	S	Core Services Only  1) Verbal declaration, entered in TWIST Counselor Notes; or  2) Self-attestation, referenced in TWIST Counselor Notes.  Intensive or Training Services for All Youth and Adult/DW/NEG Participants  1) Alimony agreement;  2) Award letter from veteran's administration (with statement of monetary amount);  3) Bank statements;  4) Compensation award letter;  5) Court award letter;  6) Pension statement;  7) Employer statement/contact;  8) Family or business financial records;  9) Pay stubs;  10) Social security benefits;  11) Public assistance records;  12) Quarterly estimated tax for self-employed persons;  13) UI documents;  14) Same documentation as Data Element #120, "Temporary Assistance for Needy Families (TANF)," and Data Element #121, "Other Public Assistance Recipient";  15) Self-employment verification form;  16) Other official document issued by a federal, state, or local governmental agency, such as a letter from the Texas Department of Housing and Community Affairs through the Section 8 Housing Choice Voucher Program, indicating monetary amount of assistance; or	To provide efficient customer service and ensure appropriate collection of data validation items, it is recommended that Boards collect validation material at the highest level (i.e., collecting data for intensive or training services levels rather than core service levels).  Core services requirements do not apply to youth participants. Data elements for youth participants must be collected at established youth program levels.  Information entered into TWIST Counselor Notes is sufficient to meet state requirements for core services only. Boards may require more complex record keeping; however, Boards must be aware that monitors will review records based on the Board's policy. For example, if a Board requires Texas Workforce Center staff to collect more detailed documentation, but staff collects only self-attestation, monitors will fail the element.  Self-attestation may be documented by a signed self-attestation form, a TWIST data entry screen signed by the participant, or a telephone verification form signed by the case manager, with appropriate notations in TWIST Counselor Notes.

Data	Data Element Name	Data Element Definition	Code Value		R	equir	ed			State Source Documentation Requirements	Notes
Element Number				Adult	D/W	Youth	TAA	NEG	Validation		
#120	Temporary Assistance for Needy Families	Record 1 if the individual is a person who:  (A) receives, or is a member of a family which receives, cash payments under a federal, state, or local income-based public assistance program;	1 = Yes 2 = No	Y	Y	Y	N	N	S	Core Services Only  1) Cross-match with TWIST TANF screens; 2) Verbal declaration, entered in TWIST Counselor Notes; or	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  To provide efficient customer service and ensure appropriate collection of data validation items, it is recommended that Boards collect
	(TANF)  (Includes individuals who are currently receiving, or are within a household which receives, TANF, and individuals who received, or who are in a household which received, TANF within the last 6 months)  DRVS #21	or  (B) received an income, or is a member of a family that received a total family income, for the six-month period prior to program participation (exclusive of unemployment compensation, child support payments, payments described in subparagraph A and old age and survivors insurance benefits received under section 202 of the Social Security Act (42 U.S.C 402)) that, in relation to family size does not exceed the higher of (i) the poverty line, for an equivalent period, or (ii) 70 percent of the lower living standard income level, for an equivalent period; or  (C) is a member of a household that receives (or has been determined within the 6-month period prior to program participation) Food Stamps under the Food Stamp Act of 1977 (7 U.S.C. 2011 et seq.); or  (D) qualifies as a homeless individual, as defined in subsections (a) and (c) of section 103 of the Stewart B. McKinney Homeless Assistance Act (42 U.S.C. 11302); or  (E) is a foster child on behalf of whom state or local government payments are made; or  (F) is a person with a disability whose own income meets the income criteria established in WIA section 101(25)(A) or (B), but is a member of a family whose income does not meet the established criteria.								<ol> <li>Self-attestation, referenced in TWIST Counselor Notes.</li> <li>Intensive or Training Services for All Youth and Adult/DW/NEG Participants</li> <li>Cross-match with TWIST TANF screens;</li> <li>Copy of Texas Health and Human Services Commission (HHSC) records maintained in a hard case file, referenced in TWIST Counselor Notes; or</li> <li>Copy of out-of-state HHSC/public assistance documentation maintained in a hard case file, referenced in TWIST Counselor Notes.</li> </ol>	validation material at the highest level (i.e., collecting data for intensive or training services levels rather than core service levels).  Core services requirements do not apply to youth participants. Data elements for youth participants must be collected at established youth program levels.  Information entered into TWIST Counselor Notes is sufficient to meet state requirements for core services only. Boards may require more complex record keeping; however, Boards must be aware that monitors will review records based on the Board's policy. For example, if a Board requires Texas Workforce Center staff to collect more detailed documentation, but staff collects only self-attestation, monitors will fail the element.  Self-attestation may be documented by a signed self-attestation form, a TWIST data entry screen signed by the participant, or a telephone verification form signed by the case manager, with

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Element Number				Adult	M/Q	Youth	TAA	NEG	Validation Rule		
#121	Other Public Assistance Recipient DRVS #22	Record 2 if the individual does not meet the criteria presented above.  Record 1 if the individual is a person who is receiving or has received cash assistance or other support services from one of the following sources in the last six months prior to participation in the program: General Assistance (GA) (state/local government), Refugee Cash Assistance (RCA), Supplemental Nutrition Assistance Program (SNAP) benefits , or Supplemental Security Income (SSI-SSA Title XVI). Do not include foster child payments.  Record 2 if the individual does not meet the above criteria.	1 = Yes 2 = No	Y	Y	Y	N	N	S	Core Services Only  1) Cross-match with TWIST Supplemental Nutrition Assistance Program Employment & Training (SNAP E&T) screens;  2) Verbal declaration, entered in TWIST Counselor Notes; or  3) Self-attestation, referenced in TWIST Counselor Notes. Copy of self-attestation form maintained in a hard case file.  Intensive or Training Services For All Youth and Adult/DW/NEG Participants A copy of one the following must be maintained in a hard case file and referenced in TWIST Counselor Notes: 1) Cross-match with TWIST SNAP E&T screens; 2) Authorization to receive cash public assistance; 3) Public assistance check; 4) Medical card showing cash grant status; 5) Refugee assistance records; 6) Local cash assistance program; 7) HHSC records; or 8) Out-of-state HHSC/public assistance documentation.	appropriate notations in TWIST Counselor Notes.  Texas benefit information is migrated from HHSC's IT system into TWIST and meets the cross match standard.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  To provide efficient customer service and ensure appropriate collection of data validation items, it is recommended that Boards collect validation material at the highest level (i.e., collecting data for intensive or training services levels rather than core service levels).  Core services requirements do not apply to youth participants. Data elements for youth participants must be collected at established youth program levels.  Information entered into TWIST Counselor Notes is sufficient to meet state requirements for core services only. Boards may require more complex record keeping; however, Boards must be aware that monitors will review records based on the Board's policy. For example, if a Board requires Texas Workforce Center staff to collect more detailed documentation, but staff collects only self-attestation, monitors will fail the

Data	Data Element Name	Data Element Definition	Code Value		Re	equire	ed			State Source Documentation Requirements	Notes
Element Number				Adult	D/W	Youth	TAA	NEG	Validation		
											element.  Self-attestation may be documented by a signed self-attestation form, a TWIST data entry screen signed by the participant, or a telephone verification form signed by the case manager, with appropriate notations in TWIST Counselor Notes.  TWIST – TANF History and SNAP E&T screens.  Texas benefit information is migrated from HHSC's IT system into TWIST and meets the cross match standard.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data	Data Element	Data Element Definition	Code Value		R	Require	ed		e n	State Source Documentation Requirements Notes
Element Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule	
#123	Displaced Homemaker DRVS #24	Record 1 if the individual is a person who has been providing unpaid services to family members in the home and has been dependent on the income of another family member but is no longer supported by that income and is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment.  Record 2 if the individual does not meet the conditions described above.	1 = Yes 2 = No	N	Y	N	N	Y	S	Self-attestation, entered into TWIST Counselor Notes; or  2) Self-attestation, referenced in TWIST Counselor Notes.  Self-attestation may be documented by a signed self-attestation form, a  TWIST data entry screen signed by the participant, or a telephone verification form signed by the case manager, with appropriate notations in TWIST Counselor Notes.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#124	Date of Actual Qualifying Dislocation DRVS #25	Record the date of separation or dislocation from employment. This date is the last day of employment at the dislocation job. If there is no dislocation job (e.g., displaced homemaker), leave blank.  TAA- Record the most recent date of separation from trade-impacted employment that qualifies the individuals to receive benefits and/or services under the Trade Act.	YYYYMMDD	N	Y	N	Y	Y	M	1) Verbal declaration, entered into TWIST Counselor Notes; 2) Self-attestation, referenced in TWIST Counselor Notes; 3) Customer's self-reported date of dislocation in WorkInTexas.com; 4) Telephone or written verification from employer; 5) TWIST rapid response list; 6) Notice of layoff; or 7) Public announcement with follow-up cross match with UI  TAA - Validated at the State Level  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#125	Homeless Individual and/or Runaway Youth DRVS #26	Record 1 if the individual (adult or youth) is a person who lacks a fixed, regular, adequate night time residence. This definition includes any individual who has a primary night time residence that is a publicly or privately operated shelter for temporary accommodation; an institution providing temporary residence for individuals intended to be institutionalized; or a public or private place not designated for or	1 = Yes 2 = No	N	N	Y	N	N	S	S 1) Self-attestation appearing in TWIST through entry into WorkInTexas.com;  2) Verbal declaration, entered into TWIST Counselor Notes;  3) Self-attestation, referenced in TWIST Counselor Notes; or  4) Written statement from an individual or social service agency providing residence shelter, entered into TWIST Counselor Notes:  Counselor Notes.  Homeless Individual and/or Runaway Youth information may have been entered into WorkInTexas.com by the participant. The information is authenticated through login and password. This process is considered to be the same as an electronic signature and meets the definition of self-attestation.

Data	Data Element	Data Element Definition	Code Value		Req	uired		2	ie ii	State Source Documentation Requirements	Notes
Element Number	Name			Adult D/W		Youth	TAA	NEG	Rule		
		ordinarily used as a regular sleeping accommodation for human beings; or a person under 18 years of age who absents himself or herself from home or place of legal residence without the permission of his or her family (i.e., runaway youth). This definition does not include an individual imprisoned or detained under an Act of Congress or state law. An individual who may be sleeping in a temporary accommodation while away from home should not, as a result of that alone, be recorded as homeless.  Record 2 if the individual does not meet the conditions described above.									Verbal declaration is sufficient to meet state requirements. Boards may require more complex record keeping; however, Boards must be aware that monitors will review records based on the Board's policy. For example, if a Board requires Texas Workforce Center staff to collect more detailed documentation, but staff collects only self-attestation, monitors will fail the element.  Self-attestation may be documented by a signed self-attestation form, a TWIST data entry screen signed by the participant, or a telephone verification form signed by the case manager, with appropriate notations in TWIST Counselor Notes.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#126	Offender DRVS #27	Record 1 if the individual (adult or youth) is a person who either (a) is or has been subject to any stage of the criminal justice process for committing a status offense or delinquent act, or (b) requires assistance in overcoming barriers to employment resulting from a record of arrest or conviction for committing delinquent acts, such as crimes against persons, crimes against property, status offenses, or other crimes.  Record 2 if the individual does not meet any one of the conditions described above.	1 = Yes 2 = No	N N		Y	N	N	S	<ul> <li>Offenders – Texas Department of Criminal Justice (TDCJ)</li> <li>Validated at the state level for those participants reported through Project Reintegration of Offenders (Project RIO) automated data transfer to TWIST.</li> <li>Offenders other than TDCJ</li> <li>Verbal declaration, entered on the Program Detail screen on the Characteristics tab and in TWIST Counselor Notes;</li> <li>Self-attestation, referenced in TWIST Counselor Notes;</li> <li>Documentation from juvenile or adult criminal justice system; or</li> <li>Telephone verification with court representatives.</li> </ul>	Offenders other than TDCJ: Verbal declaration is sufficient to meet state requirements. Boards may require more complex record keeping; however, Boards must be aware that monitors will review records based on the Board's policy. For example, if a Board requires Texas Workforce Center staff to collect more detailed documentation, but staff collects only self-attestation, monitors will fail the element.  Self-attestation may be documented

Data	Data Element	Data Element Definition	Code Value		Req	quired	i		n le	State Source Documentation Requirements	Notes
Element Number	Name			Adult		Youth	TAA	NEG	Validation Rule		
#127	Dragnant or	Decord 1 if the individual is a person who is either	1 - Vos	N. N.	T	V	N	N	c	Ducamont	by a signed self-attestation form, a TWIST data entry screen signed by the participant, or a telephone verification form signed by the case manager, with appropriate notations in TWIST Counselor Notes.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#127	Pregnant or Parenting Youth DRVS #28	Record 1 if the individual is a person who is either under 22 years of age and who is pregnant, or an individual (male or female) who is providing custodial care for one or more dependents under age 18.  Record 2 if the individual does not meet the conditions described above.	1 = Yes 2 = No	N N	1	Y	N	N	S	<ol> <li>Verbal declaration, entered on the <i>Program Detail</i> screen on the <i>Characteristics</i> tab and in TWIST <i>Counselor Notes</i>;</li> <li>Staff observation recorded on the <i>Program Detail</i> screen on the <i>Characteristics</i> tab and entered in TWIST <i>Counselor Notes</i>;</li> <li>Self-attestation, referenced in TWIST <i>Counselor Notes</i>; or</li> <li>Doctor's note confirming pregnancy.</li> </ol> Parenting 1) Any DRVS Field #3 (Date of Birth) acceptable documentation (e.g., child's birth certificate, child's school records) that demonstrates that the participant is the child's parent; 2) HHSC TANF or SNAP print screen showing the participant and child; 3) Other official document issued by a state or local governmental agency or court which demonstrates that the participant is the child's parent or legal guardian, such as a copy of a signed Acknowledgement of Paternity Form that has been filed with the Bureau of Vital Statistics or a copy of legal documents indicating guardianship or adoption; or 4) For situations involving step-parenting, participants may	Self-attestation may be documented by a signed self-attestation form, a TWIST data entry screen signed by the participant, or a telephone verification form signed by the case manager, with appropriate notations in TWIST Counselor Notes.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data	Data Element	Data Element Definition	Code Value		I	Requir	ed			State Source Documentation Requirements Notes
Element Number	Name			Adult	D/W		TAA	NEG	Validation	Range Comment of the
										provide a copy of an official document issued by a state or local governmental agency or court that names the child and the child's parent such as a birth certificate or adoption record <b>and</b> proof of marriage to the child's parent, such as a copy of their marriage certificate or common law marriage certificate.
#128	Youth Who Needs Additional Assistance DRVS #29	Record 1 if the individual is a person who is between the ages of 14 and 21 and requires additional assistance to complete an educational program or to secure and hold employment as defined by state or local policy. If the State Board defines a policy, the policy must be included in the State Plan.  Record 2 if the individual does not meet the conditions described above.	1 = Yes 2 = No	N	N	Y	N	N	S	1) Self-attestation documentation matching local policy, documented in TWIST Counselor Notes; 2) Hard case file documenting match with local policy, documented in TWIST Counselor Notes; or 3) TWIST Counselor Notes.  Note: "Youth Who Needs Additional Assistance" is defined at the local level. Documentation must support the local policy.  Self-attestation may be documented by a signed self-attestation form, a TWIST data entry screen signed by the participant, or a telephone verification form signed by the case manager, with appropriate notations in TWIST Counselor Notes.  A copy of the required documentation not contained in a hard case file. This includes items requirements.

Data Element	Data Element	Data Element Definition	Code Value		Required				_	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
#129	School Status At Participation DRVS #30	Record 1 if the individual has not received a secondary school diploma or its recognized equivalent and is attending any secondary school (including elementary, intermediate, junior high school), whether full- or part-time, or is between school terms and intends to return to school.  Record 2 if the individual has not received a secondary school diploma or its recognized equivalent and is attending an alternative high school or an alternative course of study approved by the local educational agency whether full- or part-time.  Record 3 if the individual has received a secondary school diploma or its recognized equivalent and is attending a postsecondary school or program (whether full- or part-time), or is between school terms and intends to return to school.  Record 4 if the individual is no longer attending any school and has not received a secondary school diploma or its recognized equivalent.  Record 5 if the individual is not attending any school and has either graduated from high school or holds a GED.	1 = In-school, H.S. or less  2 = In-school, Alternative School  3 = In-school, Post-H.S.  4 = Not attending school; H.S. Dropout  5 = Not attending school; H.S. graduate		N		N	N	S	<ol> <li>Verbal declaration, entered on the TWIST <i>Program Detail</i> screen, <i>Education</i> tab, and in TWIST <i>Counselor Notes</i>; or</li> <li>Self-attestation, referenced on the TWIST <i>Program Detail</i> screen, <i>Education</i> tab, and in TWIST <i>Counselor Notes</i>.</li> </ol>	Self-attestation may be documented by a signed self-attestation form, a TWIST data entry screen signed by the participant, or a telephone verification form signed by the case manager, with appropriate notations in TWIST Counselor Notes.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#130	Basic literacy Skills deficiency (as defined in §664.205) DRVS #31	Record 1 if the participant is a person who computes or solves problems, reads, writes, or speaks English at or below the 8th grade level or is unable to compute or solve problems, read, write, or speak English at a level necessary to function on the job, in the individual's family, or in society. In addition, states and grantees have the option of establishing their own definition, which must include the above language. In cases where states	1 = Yes 2 = No	N	N	Y	N	N	S	1) TWIST – Assessment screen,  Testing tab, (system- generated).	TWIST Assessment screens are populated based on Test of Adult Basic Education (TABE) entries.

Data Element	Data Element	Data Element Definition	Code Value	Required						State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
		or grantees establish such a definition, that definition will be used for basic literacy skills determination.  Record 2 if the individual does not meet the conditions described above.									
#131	Foster Care Youth (Includes Former Foster Care Youth) DRVS# 32	Record 1 if the individual is a person who is in foster care or has been in the foster care system.  Record 2 if the individual does not meet the condition described above.	1 = Yes 2 = No	N	N	Y	N	N	S	Verbal declaration, entered in TWIST Counselor Notes; or     Self-attestation, referenced in TWIST Counselor Notes.	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#302	Date of Program Participation DRVS #34	Record the date on which the individual began receiving his/her first service funded by the program following a determination of eligibility to participate in the program.	YYYYMMDD	Y	Y	N	N	Y	M	1) TWIST – Common Measures screen.	System-generated date
#303	Date of Exit  DRVS #35	Record the date on which the last service funded by the program or a partner program is received by the participant. Once a participant has not received any services funded by the program or a partner program for 90 consecutive calendar days and has no gap in service and is not scheduled for future services, the date of exit is applied retroactively to the last day on which the individual received a service funded by the program or a partner program.  TAA- record the last day on which the participant received TAA or partner funded services after 90 days without service. See TEGL 17-05 for more information.	YYYYMMDD	Y	Y	Y	Y	Y	M	1) TWIST – Common Measures screen.	System-generated date

Data Element Number	Data Element Name	Data Element Definition	Code Value		Required		l ii	State Source Documentation Requirements Notes		
rumoer	Name			Adult	M/Q	Youth	TAA	NEG	Validation Rule	
#306	Date of First WIA Youth Service DRVS #38	Record the date on which the individual began receiving his/her first service funded by the WIA Youth program, following a determination of eligibility to participate in the program.	YYYYMMDD	N	Z	Y	N	N	M	1) TWIST – Service Tracking screen, Services tab.  User-generated date
#313a, 313b, 313c	NEG Project Numbers DRVS #45-47	Record the Project I.D. Number where the individual received services financially assisted under a National Emergency Grant (NEG). (For example, Utah projects may be numbered UT-02, so the WIASRD entry would be UT02)—WIA title ID, section 173.  Record 0000 or leave blank if the individual did not receive any services funded by a NEG.	XXXX	N	N	N	N	Y	M	1) TWIST Service Tracking screen, Services tab.  User-generated
#327	Other Reasons for Exit (at time of exit or during 3- quarter measurement period following the quarter of exit)  DRVS #61	Record 01 if the participant is residing in an institution or facility providing 24-hour support, such as a prison or hospital, and is expected to remain in that institution for at least 90 days.  Record 02 if the participant is receiving medical treatment that precludes entry into unsubsidized employment or continued participation in the program. Does not include temporary conditions expected to last for less than 90 days.  Record 03 if the participant was found to be deceased or no longer living.  Record 04 if the participant is providing care for a family member with a health/medical condition that precludes entry into unsubsidized employment or continued participation in the program. Does not include temporary conditions expected to last for less than 90 days.  Record 05 if the participant is a member of the	01 = Institutionalized 02 = Health/Medical 03 = Deceased 04 = Family Care 05 = Reserve Forces Called to Active Duty 06 = Relocated to Mandated Residential or Non-Residential Program 98 = Retirement 99 = Not a Valid SSN	Y	Y	Y	N	Y	S	TWIST – Performance Data, Exclusions tab.  User-generated

Data Element	Data Element	Data Element Definition	Code Value			Requi	red		п	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation		
		National Guard or other reserve military unit and is called to active duty for at least 90 days.  Record 06 if the youth participant is in the foster care system or any other mandated residential or nonresidential program and has moved from the area as part of such a program or system (exclusion for youth participants only).  Record 98 if the participant retired from employment.  Record 99 if the participant either disclosed an invalid social security number (SSN) or chose not to disclose an SSN.  Record 00 or leave blank if the participant exited for a reason other than one of the conditions described above.  Additional Note: Exit Reason "98 = Retirement" has been added for program management purposes only and individuals who exit the program based on this reason will not be excluded from the calculations of performance measures; they will be included.									
#332	Date of First Staff-Assisted Core Service DRVS #66	Record the date on which the individual received his/her first staff-assisted core service. (Note: This excludes self-service and informational activities.)  Leave blank if the individual did not receive staff-assisted core services.	YYYYMMDD	Y	Y	N	N	Y	M	NOT REPORTED	
#334	Date of First Intensive Service DRVS #68	Record the date on which the individual received his/her first intensive service.  Leave blank if the individual did not receive intensive services.	YYYYMMDD	Y	Y	N	N	Y	M	NOT REPORTED	

Data Element	Data Element	Data Element Definition	Code Value		Required				п	Sta	te Source Documentation Requirements	Notes	
Number	Name			Adult	M/Q	Vone	Youth	NEG	;	Validation Rule			
#335	Date Entered Training DRVS #69	Record the date on which the individual's training actually began. If multiple training services were received, record the earliest date on which the individual entered training.  Leave blank if the individual did not receive training services.  TAA – Record the date when the participant's approved training began.	YYYYMMDD	Y	Y	N	N Y	Y		M		Vendor training documentation maintained in hard case file	Note: "Start Date" in TWIST must be the exact date the individual started the training.  Note: Trade Act –approved training which begins under the WIA dislocated worker program may have a date entered training that is earlier than the participant's application date.
#336	Date Completed or Withdrew from Training DRVS #70	Record the date on which the participant completed training or withdrew from training. If multiple training services were received, record the most recent date on which the individual completed training.  Leave blank if the individual did not receive training services.	YYYYMMDD	Y	Y	N	N Y	Y		M		Vendor training documentation maintained in hard case file.	Note: "End Date" in TWIST must be the exact date the individual stopped the training.
#340	Type of Training Service #1 DRVS #74	Use the appropriate code to indicate the type of training being provided to the individual.  Record 0 or leave blank if the individual did not receive training services.	1 = On-the-Job Training  2 = Skill Upgrading & Retraining  3 = Entrepreneurial Training  4 = ABE or ESL in Combination with Training  5 = Customized Training  6 = Other Occupational	Y	Y		N N	Y			2)	TWIST – Service Tracking screen, Services tab; Vendor training documentation maintained in hard case file.	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data Element Number	Data Element Name	Data Element Definition	Code Value			Requi	red		g	Sta	ate Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation			
#343	Enrolled in Education DRVS #77	Record 1 if the individual is enrolled in secondary school, postsecondary school, an adult education program, or any other organized program of study. States may use this coding value if the youth was either already enrolled in education at the time of participation in the program or became enrolled in education at any point while participating in the program.  Record 2 if the individual was not enrolled in education.	1 = Yes 2 = No	N	N	Y	N	N	S	2)	TWIST Counselor Notes indicating verification through educational entity; or Documentation maintained in hard case file documenting telephone verification of school enrollment with school official, education institution, or training provider.	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#344	Received Educational Achievement Services DRVS #78	Record 1 if the participant received educational achievement services. Educational achievement services include, but are not limited to, tutoring, study skills training, instruction leading to secondary school completion, including dropout prevention strategies, and alternative secondary school offerings.  Record 2 if the individual did not receive any of the services described above.	1 = Yes 2 = No	N	N	Y	N	N	S		TWIST Service Tracking screen, Services tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#345	Received Employment Services DRVS #79	Record 1 if the participant received employment services. Employment services include paid and unpaid work experiences, including internships and job shadowing, and occupational skills training.  Record 2 if the individual did not receive any of the services described above.	1 = Yes 2 = No	N	N	Y	N	N	S		TWIST – Service Tracking screen, Services tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#346	Received Summer Employment Opportunities DRVS #80	Record 1 if the participant received summer employment opportunities directly linked to academic and occupational learning.  Record 2 if the individual did not receive any of the services described above.	1 = Yes 2 = No	N	N	Y	N	N	S	/	TWIST Date – Service Tracking screen, Services tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data Element	Data Element	Data Element Definition	Code Value		R	lequire	ed		-	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
#347	Received Additional Support for Youth Services DRVS #81	Record 1 if the participant received supports for youth services that include, but are not limited to, the following: (a) adult mentoring for a duration of at least twelve (12) months that may occur both during and after program participation, or (b) comprehensive guidance and counseling, including drug and alcohol abuse counseling, as well as referrals to counseling, as appropriate to the needs of the individual youth.  Record 2 if the individual did not receive any of the services described above.	1 = Yes 2 = No	N	N	Y	N	N	S	1) TWIST Date – Service Tracking screen, Services tab	Used to indicate support for youth services such as adult mentoring, guidance, and counseling—including drug and alcohol abuse counseling—and referrals to counseling as appropriate to the needs of the youth.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#348	Received Leadership Development Opportunities DRVS #82	Record 1 if the participant received services that include, but are not limited to, opportunities that encourage responsibility, employability, and other positive social behaviors, such as (a) exposure to postsecondary educational opportunities; (b) community and service learning projects; (c) peer centered activities, including peer mentoring and tutoring; (d) organizational and team work training, including team leadership training; (e) training in decision making, including determining priorities; and (f) citizenship training, including life skills training such as parenting, work behavior, and budgeting of resources.  Record 2 if the individual did not receive any of the services described above.	1 = Yes 2 = No	N	N	Y	N	N	S	1) TWIST Date – Service Tracking screen, Services tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data Element	Data Element	Data Element Definition	Code Value			Requir	red			State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
#349	Received follow-up services  DRVS #83	Record 1 if the participant received 12 months of follow-up services. Follow-up services for youth include (a) regular contact with a youth participant's employer, including assistance in addressing work-related problems that arise; (b) assistance in securing better paying jobs, career development, and further education; (c) work-related peer support groups; (d) adult mentoring; and (e) tracking the progress of youth in employment after training.  Record 2 if the individual did not receive 12 months of follow-up services.  Record 0 or leave blank if the youth has not exited or has exited and is continuing to receive follow-up services, but has not yet received 12 months of follow-up services.  Additional Note: If a youth reenrolls in WIA within 12 months of exit, Record 1 if follow-up services were provided throughout the period from exit to reenrollment.	1 = Yes 2 = No	N	N	Y	N	N	S	screen, Services tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#601	Employed in 1st Quarter after Exit Quarter DRVS #84	Record 1 if the participant was employed in the first quarter after the quarter of exit.  Record 2 if the participant was not employed in the first quarter after the quarter of exit.  Record 3 if information on the participant's employment status in the first quarter after the quarter of exit is not yet available.	1 = Yes 2 = No 3 = Information not yet available	Y	Y	Y	Y	Y	S	Supplemental Income  1) UI wage records; 2) Wage Record Interchange System	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  TAA- Support, Validate blank fields

Data Element	Data Element	Data Element Definition	Code Value	Required				n n	State Source Documentation Requirements	Notes	
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
										Performance Data screen, Employment Outcomes tab; or 2) Hard case file documenting supplemental wage information by verification with employer.	
#602	Type of Employment Match 1st Quarter After Exit Quarter DRVS #85	Use the appropriate code to identify the method used in determining the individual's employment status in the first quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the first quarter after the exit quarter. If individuals are not found in the wage records, grantees may then use supplemental data sources. If the individual is found in more than one source of employment using wage records, record the data source for which the individual's earnings are greatest.  Record 0 or leave blank if the individual was not employed in the first quarter after the quarter of exit. Additional Note: If the participant is found employed in a wage record source (e.g., state/local government employment records) that cannot be translated into quarterly earnings amounts, states should treat these employment matches as supplemental data and Record 5.	1 = UI Wage Records (In-State & WRIS)  2 = Federal Employment Records (OPM, USPS)  3 = Military Employment Records (DOD)  4 = Other Administrative Wage Records  5 = Supplemental through case management, participant survey, and/or verification with the employer  6 = Information not yet available	Y	Y	Y	N	Y	S	Validated at the State Level for All but Supplemental Income  1) UI wage records; 2) WRIS; or 3) FEDES, including DOD, USPS, and OPM.  Supplemental Income Information 1) TWIST – completed data entry on Employment Outcomes detail screen; or 2) Hard case file documenting supplemental wage information by verification with employer.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#606	Employed in 2nd Quarter after Exit Quarter DRVS #89	Record 1 if the participant was employed in the second quarter after the quarter of exit.  Record 2 if the individual was not employed in the second quarter after the quarter of exit.  Record 3 if the individual has exited but	1 = Yes 2 = No 3 = Information not yet available	Y	Y	N	N	Y	S	Validated at the State Level for All but Supplemental Income  1) UI wage records; 2) WRIS; or 3) FEDES, including DOD, USPS, and OPM.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data Element	Data Element	Data Element Definition	Code Value		Required					State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
		employment information is not yet available.								Supplemental Income Information  1) TWIST – completed data entry on Employment Outcomes detail screen; or  2) Hard case file documenting supplemental wage information by verification with employer.	
#607	Type of Employment Match 2nd Quarter After Exit Quarter DRVS #90	Use the appropriate code to identify the method used in determining the individual's employment status in the second quarter following the quarter of exit.  Wage records will be the primary data source for tracking employment in the second quarter after the exit quarter. If individuals are not found in the wage records, grantees may then use supplemental data sources. If the individual is found in more than one source of employment using wage records, record the data source for which the individual's earnings are greatest.  Record 0 or leave blank if the individual was not employed in the second quarter after the quarter of exit.  Additional Note: If the participant is found employed in a wage record source (e.g., state/local government employment records) that cannot be translated into quarterly earnings amounts, states should treat these employment matches as supplemental data and Record 5.	1 = UI Wage Records (In-State & WRIS)  2 = Federal Employment Records (OPM, USPS)  3 = Military Employment Records (DOD)  4 = Other Administrative Wage Records  5 = Supplemental through case management, participant survey, and/or verification with the employer  6 = Information not yet available	Y	Y	N	N	Y	S	Validated at the State Level for All but Supplemental Income  1) UI wage records; 2) WRIS; or 3) FEDES, including DOD, USPS, and OPM.  Supplemental Income Information 1) TWIST – completed data entry on Employment Outcomes detail screen; or 2) Hard case file documenting supplemental wage information by verification with employer.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data Element Number	Data Element Name	Data Element Definition	Code Value	Required		ä	State Source Documentation Requirements	Notes			
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
#608	Employed in 3rd Quarter After Exit Quarter DRVS #91	Record 1 if the participant was employed in the third quarter after exit.  Record 2 if the individual was not employed in the third quarter after exit.  Record 3 if the individual has exited but employment information is not yet available.	1 = Yes 2 = No 3 = Information not yet available	Y	Y	Y	Y	Y	S	Validated at the State Level for All but Supplemental Income  1) UI wage records;  2) WRIS; or  3) FEDES, including DOD, USPS, and OPM.  Supplemental Income Information  1) TWIST – completed data entry on Employment Outcomes detail screen; or  2) Hard case file documenting supplemental wage information by verification with employer.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  TAA – No Supplemental income documentation is required. TAA validated at State Level only.
#609	Type of Employment Match 3rd Quarter After Exit  DRVS #92	Use the appropriate code to identify the method used in determining the individual's employment status in the third quarter following the quarter of exit. Wage records will be the primary data source for tracking employment in the third quarter after the exit quarter. If individuals are not found in the wage records, grantees may then use supplemental data sources. If the individual is found in more than one source of employment using wage records, record the data source for which the individual's earnings are greatest.  Record 0 or leave blank if the individual was not employed in the third quarter after the quarter of exit.  Additional Note: If the participant is found employed in a wage record source (e.g., state/local government employment records) that cannot be translated into quarterly earnings amounts, states should treat these employment matches as supplemental data and Record 5.	1 = UI Wage Records (In-State & WRIS) 2 = Federal Employment Records (OPM, USPS) 3 = Military Employment Records (DOD) 4 = Other Administrative Wage Records 5 = Supplemental through case management, participant survey, and/or verification with the employer 6 = Information not yet available	Y	Y	Y	N	Y	S	Validated at the State Level for All but Supplemental Income  1) UI wage records;  2) WRIS; or  3) FEDES, including DOD, USPS, and OPM.  Supplemental Income Information:  1) TWIST – completed data entry on Employment Outcomes detail screen; or  2) Hard case file documenting supplemental wage information by verification with employer.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data Element	Data Element	Data Element Definition	Code Value			Requir	red			State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
#612	Wages 3rd Quarter Prior to Participation Quarter DRVS #95	Record total earnings for the third quarter prior to the quarter of participation.  Please enter 999999.99 if data is not yet available for this item, or data is too far in the past to obtain from the UI wage records or other administrative records. Otherwise, leave blank if this data element does not apply.	000000.00	Y	Y	Y	Y	Y	M	Validated at the State Level for All but Supplemental Income  1) UI wage records; 2) WRIS; or 3) FEDES, including DOD, USPS, and OPM.  Supplemental Income Information 1) TWIST – completed data entry on Employment Outcomes detail screen; or 2) Hard case file documenting supplemental wage information by verification with employer.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  TAA – No Supplemental income documentation is required. TAA validated at State Level only.
#613	Wage 2nd Quarter Prior to Participation Quarter DRVS #96	Record total earnings for the second quarter prior to the quarter of participation.  Please enter 999999.99 if data is not yet available for this item, or data is too far in the past to obtain from the UI wage records or other administrative records. Otherwise, leave blank if this data element does not apply.	000000.00	Y	Y	Y	Y	Y	M	Validated at the State Level for all but Supplemental Income  1) UI wage records; 2) WRIS; or 3) FEDES, including DOD, USPS, and OPM.  Supplemental Income Information 1) TWIST – completed data entry on Employment Outcomes detail screen; or 2) Hard case file documenting supplemental wage information by verification with employer.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  TAA – No Supplemental income documentation is required. TAA validated at State Level only.

Data Element	Data Element	Data Element Definition	Code Value		R	Requi	red			State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation		
#615	Wages 1st Quarter After Exit Quarter DRVS #98	Record total earnings for the first quarter after the quarter of exit  Please enter 999999.99 if data is not yet available for this item, or data is too far in the past to obtain from the UI wage records or other administrative records. Otherwise, leave blank if this data element does not apply.	000000.00	Y	Y	Y	Y	Y	M	Validated at the State Level for All but Supplemental Income  1) UI wage records;  2) WRIS; or  3) FEDES, including DOD, USPS, and OPM.  Supplemental Income Information  1) TWIST – completed data entry on Employment Outcomes detail screen; or  2) Hard case file documenting supplemental wage information by verification with employer.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  TAA – No Supplemental income documentation is required. TAA validated at State Level only.
#616	Wages 2nd Quarter After Exit Quarter DRVS #99	Record total earnings for the second quarter after the quarter of exit.  Please enter 999999.99 if data is not yet available for this item, or data is too far in the past to obtain from the UI wage records or other administrative records. Otherwise, leave blank if this data element does not apply.	000000.00	Y	Y	Y	Y	Y	M	Validated at the State Level for All but Supplemental Income  1) UI wage records; 2) WRIS; or 3) FEDES, including DOD, USPS, and OPM.  Supplemental Income Information 1) TWIST – completed data entry on Employment Outcomes detail screen; or 2) Hard case file documenting supplemental wage information by verification with employer.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  TAA – No Supplemental income documentation is required. TAA validated at State Level only.
#617	Wages 3rd Quarter After Exit Quarter DRVS #100	Record total earnings for the third quarter after the quarter of exit.  Please enter 999999.99 if data is not yet available for this item, or data is too far in the past to obtain from the UI wage records or other administrative records.	000000.00	Y	Y	Y	Y	Y	М	Validated at the State Level for All but Supplemental Income 1) UI wage records; 2) WRIS; or 3) FEDES, including DOD, USPS, and OPM.	A copy of supplemental income information documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data Element	Data Element	Data Element Definition	Code Value		F	Requi	ired		g	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
		Otherwise, leave blank if this data element does not apply.								Supplemental Income Information  1) TWIST – completed data entry on Employment Outcomes detail screen; or  2) Hard case file documenting supplemental wage information by verification with employer.	TAA – No Supplemental income documentation is required. TAA validated at State Level only.
#619	Type of Recognized Credential DRVS #102	Use the appropriate code to record the type of recognized educational or occupational certificate, credential, diploma, or degree attained by the individual who received training services.  Record 0 if the individual received training services, but did not attain a recognized credential.  Credentials must be attained either during participation or by the end of the third quarter after the quarter of exit from services (other than follow-up services).	1 = High School Diploma/GED  2 = AA or AS Diploma/Degree  3 = BA or BS Diploma/Degree  4 = Occupational Skills Licensure  5 = Occupational Skills Certificate or Credential  6 = Other Recognized Educational or Occupational Skills Certificate/ Credential	Y	Y	Y	N	N	S	Copy of documentation (transcript, certificate, diploma, etc.) maintained in hard case file.	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#620-667	Goals Type  Date Goal was set  Attainment of	* Use the appropriate code to record the type of skill attainment goal. Setting one basic skills goal is required if the youth is basic literacy skills deficient.  * Record the date on which the goal was set for the youth, except that the date of the first goal set must	1 = Basic Skills 2 = Occupational Skills 3 = Work Readiness	N	N	Y	N	N	**	NOT REPORTED	
	Goal	be recorded as the registration date.	Skills								

Data Element	Data Element	Data Element Definition	Code Value		R	Require	l	_	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	Validation Rule		
	Date Goal Was Attained DRVS #103- 150	* Record 1 if the goal was attained. Attainment of a goal is to be based on an individual's assessment using widely accepted and recognized measurement/assessment techniques.  Record 2 if the goal was set, but not attained. A goal is not attained when the anniversary date has passed without attainment of the goal. The anniversary date of a goal is the date one year after the date the goal was set.  Record 3 if the goal was set, but attainment is pending. This code should not be used after exit. When the youth exits, this field must be marked with a "1" or "2" for all goals that have been set.  * Record the date on which the goal was attained. This date must be on or before the one-year anniversary of the date the goal was set. However, it may be later if the participant had a gap in service during which services were not received but the participant planned to return to the program.	*YYYYMMDD  1 = Attained  2 = Set, but not attained  3 = Set, but attainment is pending  *YYYYMMDD							
#668	Attained Diploma, GED or Certificate DRVS #151	Record 1 if the individual attained a secondary school (high school) diploma recognized by the state.  Record 2 if the individual attained a GED or high school equivalency diploma recognized by the state.  Record 3 if the individual attained a certificate in recognition of an individual's attainment of technical or occupational skills, or other postsecondary degree/diploma.  Record 4 if the individual did not attain a diploma, GED, or certificate.  SPECIAL NOTE: Fields #668 and #669 will be used to calculate both the current WIA Younger Youth Diploma Rate and the common measure	1 = Individual attained a secondary school (high school) diploma.  2 = Individual attained a GED or high school equivalency diploma.  3 = Individual attained a certificate or other postsecondary degree/diploma.	N	N	Y	N N	S	1) Copy of one of the following maintained in hard case file:  a. Transcript;  b. Certificate;  c. Diploma;  d. Telephone verification with school official; or  e. School verification.	A copy of the required documentation must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.

Data Element	Data Element	Data Element Definition	Code Value		Required		-	State Source Documentation Requirements	Notes	
Number	Name			Adult	D/W	Youth	TAA	Validation Rule		
		Attainment of a Degree or Certificate for all youth (14–21). To achieve positive outcomes on both measures, the state must make sure that coding values 1 or 2 are reported when the youth receives a diploma or equivalent either during participation in the program or by the end of the first quarter after the quarter of exit. If the youth receives another degree or certificate beyond the first quarter after the quarter of exit, the state must not update the record.  If the youth did not receive a high school diploma or GED by the end of the first quarter after exit, but did receive one or more certificates while either participating in the program or by the end of the third quarter after exit, the state must record the most recent certificate attained.	4 = Individual did not attain a diploma, GED, or certificate							
#669	Date Attained Degree or Certificate DRVS #152	Record the date on which the individual attained a diploma, GED, or certificate. Ideally, the date should be the date listed on the diploma, GED, or certificate.  Leave blank if the individual did not attain a diploma, GED, or certificate.  Additional Note: For recording multiple degrees or certificates, please see the special note under WIASRD Element #668.	YYYYMMDD	N	N	Y	N N	M	Copy of one of the following maintained in hard case file:     a. Transcript;     b. Certificate;     c. Diploma;     d. Telephone verification with school official; or     e. Letter or documentation from school system.	A copy of the required documentation must be maintained in a hard case file.  This includes items required by Board policy that may exceed state requirements.
#670	School Status at Exit DRVS #153	Record 1 if the individual has not received a secondary school diploma or its recognized equivalent and is attending any primary or secondary school (including elementary, intermediate, junior high school), whether full- or part-time, or is between school terms and intends to return to school.  Record 2 if the individual has not received a secondary school diploma or its recognized equivalent and is attending an alternative high school or an alternative course of study approved by the local educational agency whether full- or part-time.	1 = In-school, H.S. or less 2 = In-school, Alternative School 3 = In-school, Post-H.S. 4 = Not attending school; H.S. Dropout	N	N	Y	N N	S	NOT REPORTED	

Data Element Number	Data Element Name	Data Element Definition	Code Value		Requi	red		Ę.	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W Youth	TAA	NEG	Validation Rule		
		Record 3 if the individual has received a secondary school diploma or its recognized equivalent and is attending a postsecondary school or program (whether full- or part-time), or is between school terms and intends to return to school.  Record 4 if the individual is no longer attending any school and has not received a secondary school diploma or its recognized equivalent.  Record 5 if the individual is not attending any school and has either graduated from high school or holds a GED.	5 = Not attending school; H.S. Graduate							
#671	Youth Placement Information DRVS #154	Use the appropriate code to record the primary activity the youth entered in the first quarter following the exit quarter (youth may qualify for more than one activity). For example, if the youth enters advanced training and has entered a qualified apprenticeship, please record 4.  Record 0 if the youth did not enter any one of the activities listed in the coding value.	1 = Entered postsecondary education  2 = Entered advanced training  3 = Entered military service  4 = Entered a qualified apprenticeship	N	N Y	N	N	S	<ol> <li>TWIST records – Counselor Notes screen;</li> <li>UI wage records;</li> <li>Cross match with other agencies;</li> <li>Apprenticeship verification;</li> <li>Military service;</li> <li>Advanced training;</li> <li>Postsecondary education;</li> <li>Transcripts;</li> <li>Registration forms;</li> <li>Community college information; or</li> <li>Employer contacts.</li> </ol>	Used to record youth placement in first quarter AFTER exit quarter.  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.
#672	Youth Retention Information DRVS #155	Use the appropriate code to record the primary activity the youth entered in the third quarter following the exit quarter (youth may qualify for more than one activity). For example, if the youth enters advanced training and has entered a qualified apprenticeship, please record 4.  Record 0 if the youth did not enter any one of the activities listing in the coding value.	1 = In postsecondary education  2 = In advanced training  3 = In military service  4 = In a qualified apprenticeship	N	N Y	N	N	S	NOT REPORTED	

Data Element	Data Element	Data Element Definition	Code Value		R	Require	d		<b>-</b>	State Source Documentation Requirements	Notes
Number	Name			Adult	M/Q	Youth	TAA		Validation Rule		
#701-743	Category of	* <b>Record 1</b> if the participant was assessed using approved tests for Adult Basic Education (ABE).	* 1 = ABE 2 = ESL	N	N	Y	N	N	** S		the required documentation not
	Assessment								S		in TWIST must be maintained case file. This includes items
	(Literacy/ Numeracy)	<b>Record 2</b> if the participant was assessed using approved tests for English as a Second Language	* 1 = TABE 7-8, 9-						&		by Board policy that may exceed
	_	(ESL).	2 = CASAS						M	state requi	irements.
	DVRS #156- 198	<b>Record 0</b> or leave blank if the individual was not	3 = ABLE 4 = WorkKeys								
		assessed in literacy or numeracy.	5 = SPL 6 = BEST								rt for non-date fields. Match for
		* Use the appropriate code to record the type of	7 = BEST Plus							date fields	S.
		assessment test that was administered to the youth participant.	8 = Other Approved								
			Assessment Tool * 1 = Reading								
		* Record the date on which the pre-assessment test was administered to the youth participant.	2 = Writing								
		* Record the educational functioning level that is	3 = Language 4 = Mathematics								
		associated with the youth participant's raw scale	5 = Speaking								
		score.	6 = Oral 7 = Other Literacy								
			Functional Area								
			8 = Other Numeracy								
			Functional Area								
#701-743	Type of Assessment Test	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).	* 1 = ABE 2 = ESL	N	N	Y	N	N	S	tab contained	the required documentation not in TWIST must be maintained case file. This includes items
	DVRS #156-	Record 2 if the participant was assessed using	* 1 = TABE 7-8, 9-								by Board policy that may exceed
	198	approved tests for English as a Second Language (ESL).	2 = CASAS							state requi	irements.
		<b>Record 0</b> or leave blank if the individual was not	3 = ABLE 4 = WorkKeys								the participant's test is not obe maintained in hard case
		assessed in literacy or numeracy.	5 = SPL							files. Sco	re sheets must be maintained in
		* Use the appropriate code to record the type of	6 = BEST 7 = BEST Plus							a hard cas	e file.
		assessment test that was administered to the youth	8 = Other Approved								
		participant.	Assessment Tool								
		* Record the date on which the pre-assessment test	* 1 = Reading								

Data Element Number	Data Element Name	Data Element Definition	Code Value		Rec	quired			Ę.	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
		was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area								
#701-743	Functional Area DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	* 1 = ABE 2 = ESL  * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved  Assessment Tool * 1 = Reading 2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area	N I	N	Y	N I	N	S	1) TWIST – Assessment screen – Testing tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.

Data Element	Data Element	Data Element Definition	Code Value		R	Requir	red		а	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W				Validation Rule		
#701-743	Date Administered Pre-test DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	* 1 = ABE 2 = ESL  * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved  Assessment Tool * 1 = Reading 2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area	N	N	Y	N	N	M	1) TWIST – Assessment Screen – Testing Tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.
#701-743	Pre-test Score DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test	* 1 = ABE 2 = ESL * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved Assessment Tool * 1 = Reading	N	N	Y	N	N	S	1) TWIST – Assessment screen – Testing tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.

Data Element Number	Data Element Name	Data Element Definition	Code Value		R	Require	ed		Ę.	State Source Documentation Requirements	Notes
Number	rvaine			Adult	D/W	Youth	TAA	NEG	Validation Rule		
		* Record the educational functioning level that is associated with the youth participant's raw scale score.	2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy Functional Area 8 = Other Numeracy Functional Area								
#701-743	Educational Functioning Level DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	* 1 = ABE 2 = ESL  * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved  Assessment Tool * 1 = Reading 2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area	N	N	Y	N	N	S	1) TWIST – Assessment screen – Testing tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.

Data Element Number	Data Element	Data Element Definition	Code Value		R	Requir	ed		ă.	State Source Documentation Requirements Notes
Number	Name			Adult	M/Q	Youth	TAA	NEG	Validation Rule	
#701-743	Date Administered Post-Test (Year 1)  DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	* 1 = ABE 2 = ESL  * 1 = TABE 7-8, 9-10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved  Assessment Tool * 1 = Reading 2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area			Y			M	contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.
#701-743	Post-test Score (year 1) DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test	* 1 = ABE 2 = ESL * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved Assessment Tool * 1 = Reading	N	N	Y	Z	N	S	1) TWIST – Assessment screen – Testing tab  A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.

Data Element Number	Data Element Name	Data Element Definition	Code Value		Re	equire	d		ų.	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
		was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area								
#701-743	Educational Functioning Level (year 1) DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	* 1 = ABE 2 = ESL  * 1 = TABE 7-8, 9-10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved  Assessment Tool * 1 = Reading 2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area	N	N	Y	N	N	S	1) TWIST – Assessment screen – Testing tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.

Data Element	Data Element	Data Element Definition	Code Value		F	Requi	ired		а	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W				Validation Rule		
#701-743	Date Administered Post-test (year 2) DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	* 1 = ABE 2 = ESL  * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved  Assessment Tool * 1 = Reading 2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area	N	N	Y	N	N	M	tab  conta in a h requi state  A cop requi files.	opy of the required documentation not tained in TWIST must be maintained a hard case file. This includes items uired by Board policy that may exceed e requirements.  Topy of the participant's test is not uired to be maintained in hard case s. Score sheets must be maintained in ard case file.
#701-743	Post-test Score (year 2) DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test	* 1 = ABE 2 = ESL * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved Assessment Tool * 1 = Reading	N	N	Y	N	N	S	tab  conta in a h requi state  A cop requi files.	opy of the required documentation not tained in TWIST must be maintained hard case file. This includes items uired by Board policy that may exceed e requirements.  opy of the participant's test is not uired to be maintained in hard case s. Score sheets must be maintained in ard case file.

Data Element Number	Data Element Name	Data Element Definition	Code Value	Required			g		State Source Documentation Requirements	Notes	
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
		was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area								
#701-743	Educational Functioning Level (year 2) DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	* 1 = ABE 2 = ESL  * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved  Assessment Tool * 1 = Reading 2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area	N	N	Y	N	N	S	1) TWIST – Assessment screen – Testing tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.

Data Element	Data Element	Data Element Definition	Code Value		F	Requi	ired		а	State Source Documentation Requirements Notes
Number	Name			Adult	D/W				Validation Rule	
#701-743	Date Administered Post-test (year 3) DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	* 1 = ABE 2 = ESL  * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved  Assessment Tool * 1 = Reading 2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area	N	N	Y	N	N	M	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may excee state requirements.  A copy of the participant's test is not required to be maintained in a hard case files. Score sheets must be maintained in a hard case file.
#701-743	Post-test Score (year 3) DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test	* 1 = ABE 2 = ESL * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved Assessment Tool * 1 = Reading	N	N	Y	N	N	S	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.

Data Element Number	Data Element Name	Data Element Definition	Code Value		R	Requir	ed		ă	State Source Documentation Requirements	Notes
Number	Name			Adult	D/W	Youth	TAA	NEG	Validation Rule		
		was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy Functional Area 8 = Other Numeracy Functional Area								
#701-743	Educational Functioning Level (year 3) DVRS #156- 198	* Record 1 if the participant was assessed using approved tests for Adult Basic Education (ABE).  Record 2 if the participant was assessed using approved tests for English as a Second Language (ESL).  Record 0 or leave blank if the individual was not assessed in literacy or numeracy.  * Use the appropriate code to record the type of assessment test that was administered to the youth participant.  * Record the date on which the pre-assessment test was administered to the youth participant.  * Record the educational functioning level that is associated with the youth participant's raw scale score.	* 1 = ABE 2 = ESL  * 1 = TABE 7-8, 9- 10 2 = CASAS 3 = ABLE 4 = WorkKeys 5 = SPL 6 = BEST 7 = BEST Plus 8 = Other Approved  Assessment Tool * 1 = Reading 2 = Writing 3 = Language 4 = Mathematics 5 = Speaking 6 = Oral 7 = Other Literacy  Functional Area 8 = Other Numeracy Functional Area	N	N	Y	N	N	S	1) TWIST – Assessment screen – Testing tab	A copy of the required documentation not contained in TWIST must be maintained in a hard case file. This includes items required by Board policy that may exceed state requirements.  A copy of the participant's test is not required to be maintained in hard case files. Score sheets must be maintained in a hard case file.